



Mississippi
Schedule A - Itemized Deduction
Schedule B - Interest & Dividends and Schedule N - Other Income
2004

Photocopies NOT Acceptable

Page 1

Taxpayer Name

Social Security Number

PART 1: SCHEDULE A - Itemized Deductions
(From Federal Form 1040 Schedule A)

ROUND TO THE NEAREST DOLLAR

If the amount of AGI on Form 1040 exceeds the federal limits, you must refer to your Federal Schedule A and complete the worksheet provided in the MS Instructions on Page 13. Enter the result on Line 9 below. In the event you filed using the standard deduction on your Federal Return and wish to itemize for Mississippi purposes, use Federal Form 1040 Schedule A as a worksheet and transfer the information from the specific lines indicated to this Schedule A.

- | | | | |
|----|----|---|-----|
| 1. | a. | Medical and Dental Expenses (Federal Form 1040 Schedule A) | 1a. |
| | b. | AGI from Federal Form 1040 \$ _____ X 7.5%(.075) | 1b. |
| | c. | Medical & Dental Expense Deduction (Subtract line 1b from line 1a.) | 1c. |
| 2. | a. | Total Taxes Paid (Federal Form 1040 Schedule A) | 2a. |
| | b. | Less State Income Taxes (Federal Form 1040 Schedule A) | 2b. |
| | c. | Total Taxes Paid Deduction (Subtract line 2b from line 2a.) | 2c. |
| 3. | | Total Interest Paid (Federal Form 1040 Schedule A) | 3. |
| 4. | | Charitable Contributions (Federal Form 1040 Schedule A) | 4. |
| 5. | | Total Casualty or Theft Loss (Federal Form 1040 Schedule A) | 5. |
| 6. | a. | Employee Expenses & Misc. Deductions Subject to 2% Limitation (Federal Form 1040 Sch. A) | 6a. |
| | b. | AGI from Federal Form 1040 \$ _____ X 2%(.02) | 6b. |
| | c. | Subtract line 6b from line 6a | 6c. |
| 7. | a. | Other Miscellaneous Deductions (Federal Form 1040 Schedule A) | 7a. |
| | b. | Less Gambling Losses (Federal Form 1040 Schedule A) | 7b. |
| | c. | Other Miscellaneous Deduction (Subtract line 7b from line 7a.) | 7c. |
| 8. | | Mississippi Itemized Deductions - (Add Lines 1c, 2c, 3, 4, 5, 6c, and 7c.) Enter the amount here and on Resident Form 80-105, Page 1, Line 19 or Non-Resident Form 80-205, Page 1, Line 16a. | 8. |
| 9. | | Mississippi Itemized Deductions (Federal limits due to AGI apply) Enter here and on Form 80-105, Page 1, Line 19 or Form 80-205, Page 1, Line 16a. | 9. |

PART 2: SCHEDULE B - Interest and Dividend Income (From Federal Form 1040 Schedule B)

If you received capital gain distributions but do not need SCHEDULE D to report any other gains or losses, then enter the gain on Form 80-105, Page 2, Line 40 or Form 80-205, Page 2, Line 39. Total interest and dividend amounts on Lines 4 & 5 below, from jointly owned accounts, may be split between taxpayer and spouse before the amounts are transferred to Form 80-105, Page 2, Lines 36 and 37, respectively.

- | | Interest | Dividends |
|---|----------|-----------|
| 1. Interest Income (Form 1040 Schedule B) | 1. | |
| 2. Interest from obligations of the U. S. Government included in Line 1 above | 2. | |
| 3. Interest on obligations of other countries, states, cities, or political subdivisions OUTSIDE Mississippi
<small>Total Interest (Line 1 minus Line 2, plus Line 3). Enter here & on Form 80-105, Page 2, Line 40 or Form 80-205, Page 2, Line 35</small> | 3. | |
| 4. | 4. | |
| 5. Total Ordinary Dividends (Form 1040 Schedule B) | | 5. |
| 6. Amount of Nontaxable Distributions Reported in Line 5. | | 6. |
| 7. Ordinary Dividends for Mississippi.(Line 5 minus Line 6). Enter here and on Resident Form 80-105, Page 2, Line 37 or Nonresident Form 80-205, Page 2, Line 36 | | 7. |

PART 3: VOLUNTARY CONTRIBUTION CHECK-OFFS (Resident Returns Only)

You may elect to voluntarily contribute all or part (at least \$1) of your income tax refund to one or more of the funds listed below. Your contribution may be claimed as a tax deductible charitable contribution on your state and federal income tax returns. Once your return is filed, your contribution is **final** and cannot be refunded. On page 1, Line 30, Form 80-105, please indicate by each Fund L, M, K, and/or Z the amount(s) of your refund you wish to contribute to each of these funds, then enter total in the box provided. Refer to the instruction booklet 80-100 (may be downloaded from our website www.mstc.state.ms.us) for an explanation of the purpose of each of these funds and how the refund donations will be used.

- L. Mississippi Wildlife Heritage Fund
M. Mississippi Educational Trust Fund
K. Mississippi Commission for Volunteer Service Fund
Z. Mississippi Fire Fighters Memorial Burn Center Fund



MISSISSIPPI
Other Income (Loss) and Supplemental Income
2004

Page 2

SSN

	-		-	
--	---	--	---	--

PART 4: INCOME (LOSS) FROM RENTS, ROYALTIES, PARTNERSHIPS, S CORPORATIONS, TRUSTS & ESTATES**INCOME (LOSS) FROM RENTAL REAL ESTATE AND ROYALTIES**

Total Rental Real Estate and Royalty Income or (Loss) from Part 1, Federal Schedule E.		00
Add: Depletion claimed in excess of cost basis		00
A. Rental Real Estate and Royalty Income or (Loss) for Mississippi purposes. Add above 2 lines.		00

INCOME OR LOSS FROM PARTNERSHIPS AND S CORPORATIONS

Name of Partnership or S Corporation	FEIN	INCOME OR (LOSS) (Nonresidents use Mississippi K-1's)
		00
		00
		00
		00
		00
		00
		00
B. Total Partnership and/or S Corporation Income (Loss)		00

INCOME OR LOSS FROM ESTATES AND TRUSTS

Name of Estate or Trust	FEIN	INCOME OR (LOSS) (Use Mississippi K-1's)
		00
		00
		00
C. Total Estate and Trust Income (Loss)		00
D. Total of Lines A, B, & C. Enter here and on Line 38, Page 2, Form 80-105 or Line 37, Page 2, Form 80-205. (Income from Rents, Royalties, P'ships, S Corps, Trusts & Estates.)		00

PART 5: SCHEDULE N - Other Income (Loss) and Supplemental Income

(If negative, shade minus (-) in box as in example at left)

List type of Income (Loss) or Adjustment

1.		00
2.		00
3.		00
4.		00
5.		00
6.		00

Total other income (loss) Combine lines 1 through 2. Enter amount here and on Form 80-105, Page 2, Line 44 or Form 80-205, Page 2, Line 43.